1503-143-1076

FEC FORM 3X

Use

Only

FE7AN014

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED FEC MAIL CENTER

2015 JUN -5 AM 11: 57

Rev. 12/2004

For Other Than An Authorized Committee Office Use Only NAME OF TYPE OR PRINT ▼ Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. Medicinal Cannabus Superplan ADDRESS (number and street) Check if different than previously reported. (ACC) CITY A STATE A ZIP CODE A 2. FEC IDENTIFICATION NUMBER ▼ 3. IS THIS NEW **AMENDED** OR REPORT (N) (A) 4. TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug:20 (M8) (Non-Election Year Only) Report (Choose One) ... Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Runoff (12R) Primary (12P) General (12G) July 15 **PRE-Election** Quarterly Report (Q2). Special (12S) Convention (12C) Report for the: October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: ·Termination Report (TER) in the Election on State of 01/2015 5. Covering Period through October 15 10 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109. Office FEC FORM 3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name From: Report Covering the Period: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 94.00 Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)	or ricocipio	Page 3			
Write or Type Committee Name	 	- 			
medicina	I Cannabis Super	DOL			
Report Covering the Period: From	1. [6] (6] (26) 15	o: 05 22 2015			
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
11. Contributions (other than loans) Fro	om:				
(a) Individuals/Persons Other	•				
Than Political Committees					
(i) Itemized (use Schedule A).		<u> </u>			
(ii) Unitemized		1			
(iii) TOTAL (add					
Lines 11(a)(i) and (ii)					
(b) Political Party Committees		<u> </u>			
(c) Other Political Committees					
(such as PACs)		L ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			
(d) Total Contributions (add Lines					
11(a)(iii), (b), and (c)) (Carry					
Totals to Line 33, page 5)		R 2 22 C 2 22 R O 62 R			
12. Transfers From Affiliated/Other					
Party Committees					
13. All Loans Received		0			
•					
14. Loan Repayments Received					
15. Offsets To Operating Expenditures		Landon Anna Cara			
(Refunds, Rebates, etc.)					
(Carry Totals to Line 37, page 5)		\mathcal{O}			
16. Refunds of Contributions Made	La company de la	<u> </u>			
to Federal Candidates and Other					
Political Committees		7			
17. Other Federal Receipts	<u> </u>	Leaven to the Contract of the			
(Dividends, Interest, etc.)		6			
18. Transfers from Non-Federal and Le	B	· Landin Land Vina			
(a) Non-Federal Account		To the control of the			
(from Schedule H3)	\bigcap	Ô			
· · · · · · · · · · · · · · · · · · ·					
· · · · · · · · · · · · · · · · · · ·					
(b) Levin Funds (from Schedule H		<u></u>			
(a) Tabal Torontons (add 40(s) and	10(1)				
(c) Total Transfers (add 18(a) and	10(U))				
40 - T otal Book to the Control of the Control					
19. Total Receipts (add Lines 11(d),					
12, 13, 14, 15, 16, 17, and 18(c))		0 B 612 B C 412 W C			
20. Total Federal Receipts		Insulant County and the County of the County			
(subtract Line 18(c) from Line 19).		0			
•					
•		•			

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo I citod	Calcindal Teal-to-Date				
	(i) Federal Share	<u> </u>	1				
	(ii) Non-Federal Share	6	\wedge				
	(b) Other Federal Operating						
	Expenditures	0.00					
	(c) Total Operating Expenditures						
	(add 21(a)(i), (a)(ii), and (b))		<u> </u>				
22.	Transfers to Affiliated/Other Party Committees	\wedge	A				
23.	Contributions to	L 1 2 2 3 1 2 3 1 2 1 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A					
	Federal Candidates/Committees and Other Political Committees	\cap	\mathcal{D}				
	Independent Expenditures						
05	(use Schedule E)		<u> </u>				
2 5.	(52 U.S.C. § 30116(d)) (use Schedule F)		0				
			A				
26.	Loan Repayments Made	Lange of the second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
27.	Loans Made	α	\cap				
28.	Refunds of Contributions To:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	(a) Individuals/Persons Other Than Political Committees	0	0				
	·						
	(b) Political Party Committees		<u> </u>				
	(c) Other Political Committees						
	(such as PACs)		<u> </u>				
٠.	(d) Total Contribution Refunds						
	(add Lines 28(a), (b), and (c))▶	0					
29.	Other Disbursements	La 132 1 12 1 2 6 2 1	L. 1. 171 1. 1. 172 1. 10 1. 1				
30.	Federal Election Activity (52 U.S.C. § 30101(20	0))					
•	(a) Allocated Federal Election Activity						
	(from Schedule H6)						
	(i) Federal Share		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
•	(ii) "Levin" Share	0					
	(b) Federal Election Activity Paid Entirely						
٠.	With Federal Funds		0				
	(c) Total Federal Election Activity (add						
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶		L				
31.	Total Disbursements (add Lines 21(c), 22,						
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	Guaran Gulara	La granda de la gr				
22	Total Federal Disbursements						
JZ.	(subtract Line 21(a)(ii) and Line 30(a)(ii)						
	from Line 31)						
•			<u> </u>				

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
33.	Total Contributions (other than loans)	les January Carillian Sant Section 1				
•	(from Line 11(d), page 3)					
34.	Total Contribution Refunds (from Line 28(d))		0			
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	0.			
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶		0 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
37 .	Offsets to Operating Expenditures (from Line 15, page 3)					
38	Net Operating Expenditures (subtract Line 37 from Line 36)	0	0.			

Use separate schedule(s) FOR LINE NUMBER: PAGE / OF					<u>л</u>			
TEMIZED DISBURSEMENTS	for each category of the	(check only	one)	23 24	25	799 26		
	Detailed Summary Page	27	⊢ 22	28b 28c	29	30b		
Any information copied from such Reports and Statem	ents may not be sold or used	by any perso	on for the purp	pose of solicitin	g contribu	tions		
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
Medicinal Ca	phabis	Sune	Mac					
Full Name (Last, First, Middle Initial)			Data at Si	aburaan aat				
" HOUSTON JOSEN	PH (Date of Dis	soursement		arijanji		
Mailing Address	1195		051272015					
City	101/60K _ 1 _ Ca _ 95380					-		
IUMOUX (C								
Purpose of Disbursement			Amount of Each Disbursement this Period					
Candidate Name		Category/	Control of East Dispute Control of the Control of t					
		Type		<u> </u>	74.	UU		
Office Sought: House Disburser				*				
	Primary General Other (specify) ▼					•		
State: District:								
Full Name (Last, First, Middle Initial)								
B.				sbursement				
Mailing Address			H W /	0 0 /	<u>, , , , , , , , , , , , , , , , , , , </u>	Y		
maining routes								
City	State Zip Code					_		
Purpose of Disbursement	Purpose of Disbursement							
Candidate Name			Amount of Each Disbursement this Period					
								Office Sought: House Disbursem
	Primary General							
	Other (specify) ▼	!						
Full Name (Last, First, Middle Initial) C.			Date of Dis	sbursement				
		MTM /		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	FV*[
Mailing Address								
City	State Zip Code							
Purpose of Disbursement	Purpose of Disbursement							
Candidate Name Category/			Amount of Each Disbursement this Period					
			Amount of Each Disbursement this Period					
Office Sought: House Disbursen		Туре		/1 > (1)				
_	Primary General					ě		
	Other (specify) ▼							
State: District:								
SUBTOTAL of Disbursements This Page (optional)								
TOTAL This Period (last page this line number only)		·····			94	0.0		

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Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED (3/2015)